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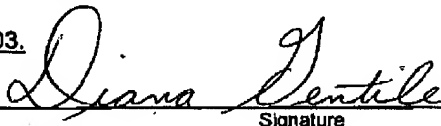
Practitioner's Docket No. MPI98-045P1RCP1CN1M  
(703) 872-9306

PATENT

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Transmittal Letter  
Response to Species Election Requirement

(2 pages – in duplicate)  
(1 page)

Total

Pages (6 – including cover)

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Practitioner's Docket No. MPI98-045P1RCP1CN1M

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: White, David, et al  
Application No.: 09/804357 Group No.: 1646  
Filed: March 12, 2001 Examiner: E. O'HARA  
For: LEPTIN INDUCED GENES

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## TRANSMITTAL LETTER

FAX RECEIVED  
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GROUP 1600

1. Transmitted herewith for this application is/are:
  - a. This Transmittal Letter (2 pages); and
  - b. Response to Species Election Requirement (1 page).

## STATUS

2. Applicant is other than a small entity.

## PETITION FOR EXTENSION OF TIME

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(3)) for a \_\_\_\_\_ month extension:

Fee: \$0.00

Extension fee due with this request \$0.00

## CERTIFICATION UNDER 37 C.F.R. SECTIONS 1.8(a) and 1.10\*

I hereby certify that, on the date shown below, this correspondence is being:

## MAILING

- ☐ deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
37 C.F.R. SECTION 1.8(a)

## 37 C.F.R. SECTION 1.10\*

- ☐ with sufficient postage as first class mail. ☐ as "Express Mail Post Office to Address"  
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Date: 18 August 2003

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**Practitioner's Docket No. MPI98-045P1RCP1CN1M**

If an additional extension of time is required, please consider this a petition therefor.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)			(Col. 2)		(Col. 3)	OTHER THAN A SMALL ENTITY		
Claims Remaining After Amendment			Highest No. Previously Paid For		Present Extra	Rate		Addit. Fee
Total	0	Minus	0	=	0	\$18.00	=	\$0.00
Indep.	0	Minus	0	=	0	\$84.00	=	\$0.00
First Presentation of Multiple Dependent Claims			0			\$280.00	=	\$0.00
						Total Addit. Fee		\$0.00

Total additional fee for claims required \$0.00

**FEE PAYMENT**

5. Charge Account No. 501668 the sum of \$0.00 (which includes the \$0.00 extension fee and the \$0.00 additional fee for claims). A duplicate of this transmittal is attached.

**FEE DEFICIENCY**

6. If any additional extension and/or fee is required, charge Account No. 501668.  
If any additional fee for claims is required, charge Account No. 501668.

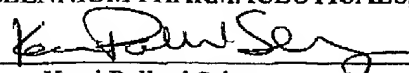
7. Correspondence Address  
Direct all future correspondence to:

Customer Number 30405  
OR  
Intellectual Property Department  
MILLENNIUM PHARMACEUTICALS, INC.  
75 Sidney Street  
Cambridge, MA 02139

18 August 2003

MILLENNIUM PHARMACEUTICALS, INC.

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